

# First-line treatment of desmoid tumor: Systemic Therapy versus Upfront Surgery

J.C.E.S.O.D. Souza, H.M. Lourenço, G. Mendes Oncology Department, INCA - Instituto Nacional de Cancer, Rio De Janeiro, Brazil

#### BACKGROUND

involution. Nowadays, the guidelines suggest to watch and wait before offering an 92%, respectively. aggressive treatment, and avoiding the surgical treatment. But in our experience patients had less morbidity and disease progression with a surgical approach.

#### METHODS

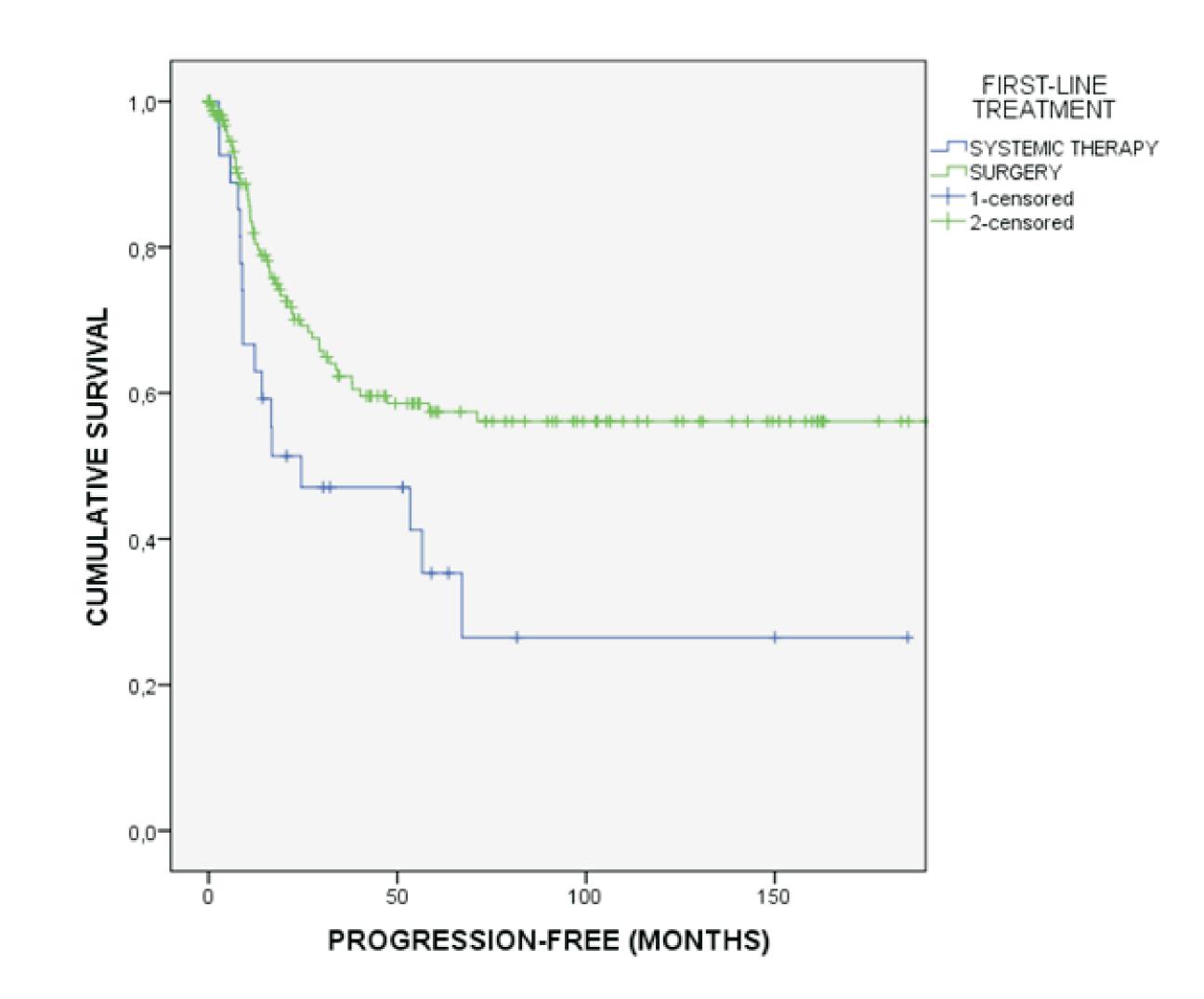
Patients with histological diagnosis of DT and treated at INCA between January 1998 and December 2015 were identified and their medical records were analyzed.

## RESULTS

Of 191 patients evaluated, there were 137 females (71.2%). The median age at diagnosis were 34 years (range:17.79-76.96y). Tumors location were: thoracoabdominal wall (n: 100, 52.3%), extremities (n: 53,27.7%), abdominal cavity (n: 26; 13.6 %), and head and neck (n: 12, 6.2%). Tumor sizes were documented in 152 cases (79.5%) and ranged from 1 to 37 cm (median, 10 cm). Twenty-seven pts (14.1%) received systemic therapy (ST) (n:5 vinblastine and methotrexate; n:22 tamoxifen) and 164 pts (85.8%) were submitted to surgery (4pts received adjuvant tamoxifen) as firstline treatment. There was no difference between gender (p:0.86), tumor location (p:0.30), or tumor size (p:0.53) when choosing first-line treatment.

The odds of severe morbidity were 2.13 higher with systemic treatment than with first-Desmoid tumor (DT) is a rare and locally invasive proliferative disease. The standard line surgery. Four pts were submitted to surgery after systemic first-line treatment. first-line treatment used to be radical surgical resection. However, during recent years After a median follow-up of 71 months, there were significantly more disease it has been debated whether to offer an aggressive and morbidity treatment to a progression at systemic therapy group (17pts – 62.9%) than at surgery group (55 pts – potentially indolent tumor. Desmoid tumor has uncertain behavior, some are 33.5%) (p:0.005), and received more subsequently treatment (p:0,01). There were 2 aggressive cases, others indolent and there are some reports of spontaneous deaths in ST group and 9 deaths in surgery group, with 10-year survival of 93.2% and

Characteristics	Systemic therapy	Surgery
Age (years)		
-Mean (range)	30,84 y (19,64-61,10)	38,53 y (17,7-76,95)
Gender		
-Male	8	46
-Female	19	118
Tumor size		
-Mean (range)	13,25 cm (3,0 - 30)	10,41 cm (1,0 - 37 cm)
Tumors location		
Thoracoabdominal wall	12	88
-Extremities	6	47
-Abdominal cavity	6	20
-Head and neck	3	9



### DISCUSSION

DT is an indolent disease but has the propensity for locally invasive growth and recur. Although systemic therapy is less aggressive treatment, it was associate to higher severe morbidity, more disease progression, and more subsequently treatment in this trial.

Projeto Gráfico: Serviço de Edição e Informação Técnico-Científica / INCA





